

Chapter 4

STRATEGIC GOALS AND OBJECTIVES

PRINCIPLES OF A COMPREHENSIVE, BALANCED STRATEGY

This urban-based Substance Abuse Strategy (the Strategy) is built on the premise that no single approach can end substance abuse or its damaging consequences. Its strategic goals and objectives involve a wide spectrum of public agencies and private entities, including prevention, treatment, and law enforcement communities. In addition to the District's efforts to mobilize against substance abuse, the actions of the federal government, adjacent regional governments, private organizations, and individual residents are all critical to the achievement of strategic goals and outcomes. Accordingly, this Strategy proposes that a comprehensive approach to reducing substance abuse be carried out via a partnership among the District government and all those who have a stake in the results: District residents, the federal government, Virginia and Maryland inter-governmental agencies, the faith community, as well as non-profit and private organizations.

FRAMING A STRATEGIC APPROACH

Every strategic framework employs certain perspectives, terminology, and approaches. This Strategy, by order of the mayor, encompasses activities aimed at reducing not only alcohol and drug use, but underage tobacco use as well. Of course, tobacco and alcohol are legal substances to those over the ages of 18 and 21, respectively. From a strategic planning standpoint, therefore, this Strategy appropriately targets the demand and availability of tobacco and alcohol for those underage individuals. Furthermore, it focuses only on the *abuse* of alcohol and the damaging effects of tobacco use by those of legal age. The charge of this strategic framework, then, is to target the use

and availability of all illicit substances (such as cocaine and heroin), the abuse of legal substances (e.g., alcohol, tobacco, and prescription drugs), and the use and availability of tobacco and alcohol that are prohibited to those under the ages of 18 and 21, respectively.

This strategic framework uses the terms *goals*, *objectives*, *performance targets*, and *performance measures*. "Goals" define the major directives of the Strategy. In this strategic plan, four goals represent four major strategic areas: prevention, treatment, criminal justice, and intergovernmental coordination. "Objectives" define major activities required to achieve the desired goal. "Performance targets" define desired end-states, outcomes, or results to track the success of the strategic plan. "Performance measures" refers to the metric, data, or information used to track progress toward the achievement of a given performance target.

This Strategy utilizes a systems approach. The reasons are several. First, a substance abuse strategy should encompass all members of a community who have a stake in its outcome. Accordingly the Mayor's Task Force on Substance Abuse Prevention, Treatment and Control (Task Force) will continue to consult with a diverse community of stakeholders on how best to achieve a set of desired ends. In addition, the Strategy will inform the budget process about resource needs. And finally, the Strategy will be grounded in a formal feedback mechanism—a performance measurement system—to report progress in achieving results. These results will, in turn, be provided to the community of stakeholders and used as a basis for subsequent refinements to the Strategy.

The strategic framework for the District's Substance Abuse Strategy consists of three basic building blocks. The first is demand reduction, which involves treatment and prevention activities. The second is criminal justice, which involves activities from policing and incarceration to probation and parole. And the third is activities of overlapping and adjacent governments whose policies and programs affect the District's ability to manage its substance abuse problem.

These three building blocks shape the parameter of the District's strategic plan. Consider the role of law enforcement. It is much more than just policing. It is the means by which many in the drug trade become involved in the District's criminal justice system. For dealers, this involvement translates into incarceration and it is hoped rehabilitation as well as reduction in the supply of drugs. For users, the criminal justice system can provide the means to begin a recovery process through court-ordered treatment. For those individuals, especially youth, who are involved in both drug selling and using, a treatment and criminal justice response must include coordinated educational and training opportunities.

Demand reduction is the best option to reduce the size of the existing substance abuse problem—mostly by targeting addiction through treatment programming and by discouraging potential new users from ever picking up illicit and illegal substances through effective prevention efforts. To achieve results, the Strategy must take into account both the demand and supply reduction activities of the federal government, which operates programs within the District, as well as the activities of adjacent governments whose policies can ameliorate or burden the District's efforts to confront its substance abuse problem.

For the purposes of comparison, it is useful to examine the strategic approach utilized by the federal government's National Drug Control Strategy in its effort to reduce drug use and its consequences nationwide. The National Drug Control Strategy seeks to

reduce drug use and its consequences through extensive activities that encompass prevention, treatment, international programs, interdiction, and law enforcement. The District's drug control Strategy is necessarily less ambitious in scope because the focus is on a limited geographic urban area and international program activities and efforts to target drug supplies through interdiction are quite obviously and constitutionally outside the scope of this or any other local strategy. But like the National Drug Control Strategy, the District's Strategy employs research-based approaches to prevention and treatment and a performance measurement system to determine progress toward achieving desired goals and objectives.

FOUR STRATEGIC GOALS

The Task Force initiated an extensive consultation process to develop a comprehensive strategic substance abuse control framework for the District. After receiving input and perspectives from members of the prevention, treatment, and law enforcement communities, including representatives of the federal government directly involved in District affairs, and outside drug control experts, the following four strategic goals and 20 objectives were identified in the context of measurable performance targets or outcomes to track progress along the way. The Task Force will continue to oversee an ongoing consultation process to implement the Strategy and refine it as necessary.

Goal 1: Educate and empower District of Columbia residents to live healthy and drug-free lifestyles.

Objectives:

Expand prevention activities through coalitions and neighborhood organizations.

Increase the effectiveness of prevention activities through the

development and strengthening of a planning, implementation, and evaluation infrastructure.

Increase the utilization of appropriate evidence-based prevention programs.

Utilize evidence-based environmental strategies to change individual and community norms.

Increase the effectiveness of the District's prevention workforce by training youth development and prevention professionals to implement effective prevention strategies.

Prevention efforts are not only morally correct, they are cost effective. This Strategy seeks to secure the District's social and financial future by encouraging its youth to engage in healthy and substance abuse-free lifestyles. This means that initiation and existing causal use (non-addictive drug use) must be strongly discouraged and successfully abated. The Strategy seeks to prevent potential users from ever starting to use drugs, alcohol, and tobacco. It seeks to get those who have tried drugs to stop their experimentation. Success with these individuals will mean fewer individuals addicted to substances in the future.

Goal 2: Develop and maintain a continuum of care that is efficient, effective, and accessible to individuals needing substance abuse treatment.

Objectives:

Increase long-term treatment capacity, especially for youth and women with children.

Increase the management effectiveness and efficiency of APRA.

Improve the treatment infrastructure by providing staff development through technical assistance and training.

Develop an accessible, integrated continuum of care containing all the necessary components, including aftercare, for individuals needing substance abuse treatment.

Develop a District-wide performance accountability system for treatment programs to support continuous quality improvement.

Addiction is a chronic disease. Substance abusers engage in treatment to recover from their addiction, but may experience relapse. A continuum of care connects programs and services starting with an individual's initial assessment and ending with the provision of support services to promote stability and to enable a successful return into the community. The objective of the continuum of care is to eliminate or reduce relapse duration and severity by addressing an individual's psychological, biological, economic, and social needs. Special populations require approaches that consider ethnic, cultural, language, sexual, and age diversity. It is premised on a "no wrong door" approach whereby those entering the treatment continuum at any point can access appropriate and effective services. Key to this placement is accurate assessment of the problem, including identification of co-occurring disorders and other issues, such as homelessness. Equally important are agency coordination, case management, and other "linkage mechanisms" by which to connect individuals with the appropriate services.

Goal 3: Increase the public's safety and improve treatment access for offenders to ensure fair and effective administration of justice in the District.

Objectives:

Reduce the number of open-air drug markets.

Form community-police partnerships to enhance neighborhood problem solving.

Strengthen the ability of law enforcement to anticipate and respond to drug-related crime.

Support the expansion of drug courts.

Improve case management of defendants/offenders and their transition

back into the community, including re-entry support services.

Develop law enforcement and prosecutorial opportunities to divert non-violent youth to alternative community-based interventions.

Ensuring the public's sense of safety requires an aggressive and coordinated law enforcement effort that targets drug dealing. For those users who come in contact with the criminal justice system, there must be opportunities for treatment and rehabilitation guided by the principle of personal accountability and responsibility for one's own recovery. And for those who commit violent crimes, there must be certainty of punishment. Moreover, since addicted drug users account for over two-thirds of the consumption of illicit drugs, targeting them for treatment via the criminal justice system will, in turn, reduce consumption and improve efforts to reduce drug dealing and the associated social costs.

Goal 4: Encourage a coordinated and focused regional response to the problem of substance abuse.

Objectives:

Promote regional resource sharing and opportunities for joint initiatives through partnerships among federal, state, county, and District drug control agencies.

Foster the adoption of consistent and mutually supportive anti-substance abuse laws and policies across jurisdictions.

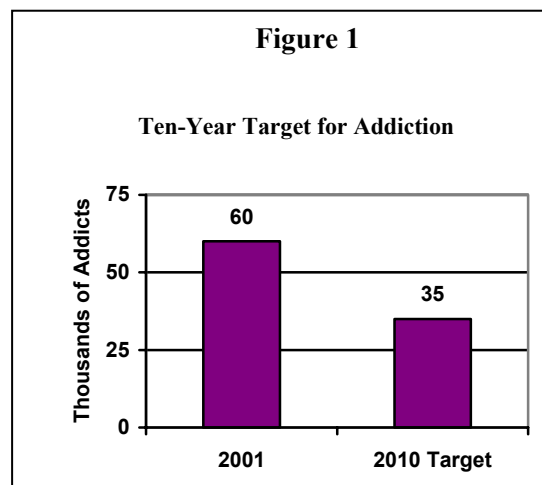
Identify and remove barriers to treatment across jurisdictions.

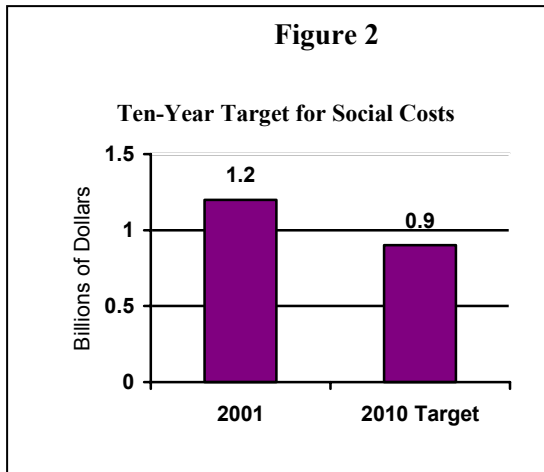
Overall success of this Strategy will require the commitment of the entire metropolitan Washington area. The goals and objectives of this Strategy reflect an effort to solicit many ideas on how to improve community involvement and coordination. Remarkably, the Task Force discovered that numerous members of treatment, prevention, and the criminal justice systems had never

been involved in joint drug control strategic planning. Their joint participation in this effort has produced a comprehensive, balanced plan. In addition, the Task Force has reached out to the Metropolitan Washington Council of Governments, including their prevention and treatment subcommittees, to develop cooperation among the Maryland, Virginia, and DC government agencies in the areas of policy and program planning and development, program coordination and support, and education and information.

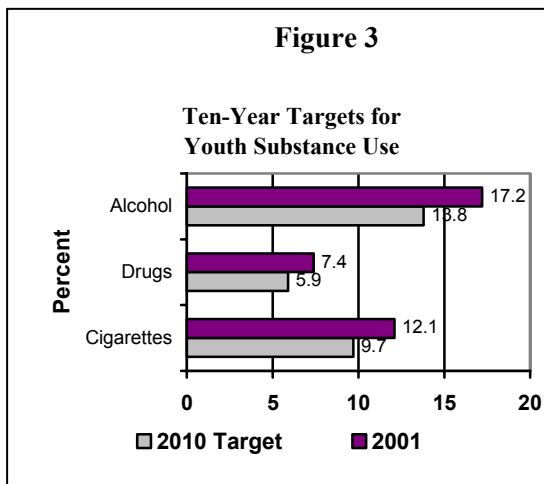
FOCUSING ON RESULTS

This Strategy focuses on reducing the immediate drug problem on two fronts: reducing the number of addicts in the District and reducing the size of the potential problem by discouraging new and existing "casual" drug use. Success on these two fronts will translate directly into reductions in the consequences of substance abuse as represented by a reduction in its social costs. As has been previously noted in Chapter 1, this Strategy seeks to achieve two overarching goals by the year 2010: a 25,000 reduction in the number of addicts from the estimated current level of 60,000 addicts (Figure 1) and a reduction of the annual social costs of addiction by \$300 million (Figure 2).



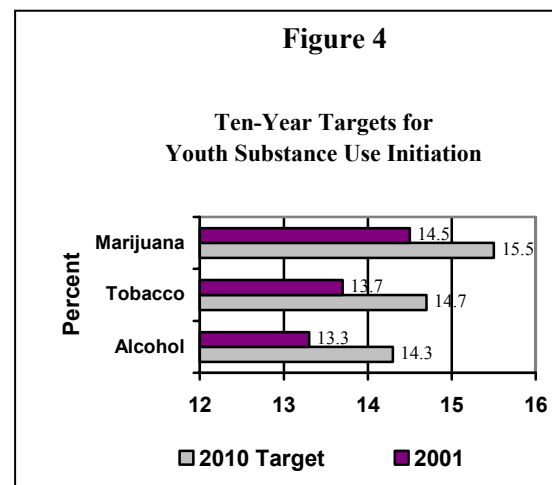


With regard to overall rates of substance use among District youth ages 12 to 17, this Strategy seeks to reduce this population's substance abuse prevalence by 20 percent (Figure 3). In light of the encouraging data for youth substance use initiation in the District, this Strategy seeks to further increase the average age of new substance use initiation for alcohol, tobacco, and marijuana by one year (Figure 4).



Achieving results will require a focus on three aspects of substance abuse: addiction, youth drug use, and social costs. These three categories will be used to track the success of the District's global substance abuse control efforts represented by this Strategy. Ultimately, however, the success of this

Strategy requires the positive contribution of city agencies, private groups and organizations, individuals, and the successful coordination of substance abuse efforts within the metropolitan area. District agencies will track the progress of their individual efforts using their respective agency performance plans. In addition, the Task Force will monitor individual agencies by tracking their progress toward achieving respective performance milestones.



The Task Force will report biennially (once every two years) to the mayor on whether this Strategy is achieving its anticipated results.

MEASURING PERFORMANCE

The District will systematically measure progress for the three performance outcome areas: reducing addiction, youth drug use (new use and prevalence), and social costs.

The Addiction Prevention and Recovery Administration (APRA) will be responsible for reporting to the Task Force biennially on progress in achieving these outcomes. The Task Force will meet quarterly to consider policy and program matters related to the District's Substance Abuse Strategy. It will then prepare an annual report for the mayor

describing progress against the performance targets, program and policy concerns, and the resource needs to achieve results.

With regard to tracking progress against the performance targets, the Task Force will use the following sources of information:

- **District Household Survey on Substance Abuse**—This survey will be used to report progress toward reducing youth drug use. The Household Survey will be conducted biennially and will report drug use initiation and prevalence for youth ages 12 to 17. The 2001 Survey, released in September 2001, will serve as the baseline against which to measure progress. The second Household Survey results are planned for fall 2004.
- **The Social Costs of Drug Abuse in the District of Columbia**—APRA will have biennial studies conducted to determine changes in the size and composition of social costs in the District. APRA will establish a

methodology for the District with results expected by spring 2005.

- **Estimates of the Number of Addicts**—APRA will report biennially on the number of addicts in the District who need treatment. To accomplish this, APRA will identify a methodology to estimate the size of the addict population in the District and will report an estimate to the Task Force by spring 2005.

In addition, APRA will prepare a biennial report delineating the size of the “treatment gap” in the District and the progress of the new treatment voucher system to address it. This report will assist the Task Force in identifying program and resource options to most effectively close the “treatment gap.” Treatment need and capacity will include the requirements of the criminal justice system, which manages drug offenders in prison and jail as well as on parole and probation.

Strategic Goals and Objectives

SUMMARY

GOAL #1: EDUCATE AND EMPOWER DISTRICT OF COLUMBIA RESIDENTS TO LIVE HEALTHY AND DRUG-FREE LIFESTYLES

- Expand prevention activities through the use of a broad cross-sector advisory group as well as through coalitions and neighborhood organizations.
- Increase the effectiveness of prevention activities through the development and strengthening of a planning, implementation, and evaluation infrastructure.
- Increase the utilization of appropriate evidence-based prevention programs.
- Utilize evidence-based environmental strategies to change individual and community norms.
- Increase the effectiveness of the District's prevention workforce by training youth development and prevention professionals to implement effective prevention strategies.

GOAL #2: DEVELOP AND MAINTAIN A CONTINUUM OF CARE THAT IS EFFICIENT, EFFECTIVE, AND ACCESSIBLE TO INDIVIDUALS NEEDING SUBSTANCE ABUSE TREATMENT

- Increase long-term treatment capacity, especially for youth and women with children.
- Increase the management effectiveness and efficiency of APRA.
- Improve the treatment infrastructure by providing staff development through technical assistance and training.
- Develop an accessible, integrated continuum of care containing all the necessary components, including aftercare, for individuals needing substance abuse treatment.
- Develop a District-wide performance accountability system for treatment programs to support continuous quality improvement

GOAL #3: INCREASE THE PUBLIC'S SAFETY AND IMPROVE TREATMENT ACCESS FOR OFFENDERS TO ENSURE FAIR AND EFFECTIVE ADMINISTRATION OF JUSTICE IN THE DISTRICT

- Reduce the number of open-air drug markets.
- Form community-police partnerships to enhance neighborhood problem solving.
- Strengthen the ability of law enforcement to anticipate and respond to drug-related crime.
- Support the expansion of drug courts.
- Improve case management of defendants/offenders and their transition back into the community, including re-entry support services.
- Develop law enforcement and prosecutorial opportunities to divert non-violent youth to alternative community-based interventions.

GOAL #4: ENCOURAGE A COORDINATED AND FOCUSED REGIONAL RESPONSE TO THE PROBLEM OF SUBSTANCE ABUSE

- Promote regional resource sharing and opportunities for joint initiatives through partnerships among federal, state, county, and District drug control agencies.
- Foster the adoption of consistent and mutually supportive anti-substance abuse laws and policies across jurisdictions.
- Identify and remove barriers to treatment across jurisdictions.

